FILED23 DEC\*24 10:30USDC-ORP

## UNITED STATES DISTRICT COURT

### DISTRICT OF OREGON

DIVISION

Portland

Doglas LEON SERVOS  (Enter full name of plaintiff)  Plaintiff,	Civil Case No. 6:24-cv-2144-SI (to be assigned by Clerk's Office)
v.	COMPLAINT FOR VIOLATION OF CIVIL RIGHTS (PRISONER COMPLAINT)
SANTIAM COPRECTIONAL  JUSTITUTION	Jury Trial DemandedYesNo
(Enter full name of ALL defendant(s))	
Defendant(s).	

Plaintiff

Name: Duplat LEON SERVOS

List your name, address, and telephone number below, and the same information for

I. PARTIES

each defendant. Make sure that the defendant(s) listed below are identical to those contained in the caption of the complaint. Attach additional sheets of paper if necessary.

#12063427

Street Address: SANIAM CORRECTIONAL INSTITUTION

City, State & Zip Code: Salem OR 973/7

Telephone No.: 400S AUMSVILE HOUY 3E

Complaint for Violation of Civil Rights (Prisoner Complaint)

[Rev. 01/2018]

Defendant No. 1	Name: SANTIAM CORRECTIONAL INSTITUTEON
	Street Address: 4005 Aumville Hay SE
	City, State & Zip Code: SALEM OR 97317
	Telephone No.:
Defendant No. 2	Name:
	Street Address:
	City, State & Zip Code:
	Telephone No.:
Defendant No. 3	Name:
	Street Address:
	City, State & Zip Code:
	Telephone No.:
Defendant No. 4	Name:
	Street Address:
	City, State & Zip Code:
	Telephone No.:
	II. BASIS FOR JURISDICTION
rights, privileges, or v. Six Unknown Ag	S.C. § 1983, you may sue state or local officials for the "deprivation of any immunities secured by the Constitution and [federal laws]." Under <i>Bivens of Federal Bureau of Narcotics</i> , 403 U.S. 388 (1971), you may sue the violation of certain constitutional rights.
A. You are b	ringing suit against (check all that apply):
☐ Fe	deral officials (a Bivens claim)
Sta	ate or local officials (a § 1983 claim)

B. What federal constitutional, statutory, or treaty right(s) is/are at issue?

The	DRISON	I	Am	iN	is	A	NONE	Smoking
	/		IN.	titu	tia	aV		

#### III. STATEMENT OF CLAIMS

#### Claim I

State here as briefly as possible the facts of your case. Describe how each defendant was involved, when the conduct occurred, and any injuries you have suffered as a result. It is not necessary to give any legal arguments or cite any cases or statutes.

I been in prison almost two
years, on a 30th mounth Case and I
Had to put up with Snoking Every
day that I BEEN IN PRISON
I HAVE a HARD FINE BEEATINING
the way it is I AM 65 yEARS Old
And I should Not HAVE to put up
with Smoking, in a NONE Smokeing
IN-3tutition

#### Claim II

State here as briefly as possible the facts of your case. Describe how each defendant was involved, when the conduct occurred, and any injuries you have suffered as a result. It is not necessary to give any legal arguments or cite any cases or statutes.

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# IV. EXHAUSTION OF ADMINISTRATIVE REMEDIES

I have filed for administrative relief as to all claims in Section III and have concluded all administrative appeals available to me.

Yes No

## V. RELIEF

State <u>briefly</u> exactly what you want the court to do for you and the amount, if any, of monetary compensation you are seeking. Make no legal arguments. Cite no cases or statutes.
I would like to be given
500,000 dollars, to all the time
I had to sut up with Smokeing
in a some Smokerny Tustitution
My breathing has got WORSE in
the last Tux years that I
lean in prisen around seeple smeking
every time I go to the Bathroom
in a work Snokeing Frestitution
State DRISON
I declare under penalty of perjury that the foregoing is true and correct.
Signed this 13 day of 1cc, 2024
(Signature of Plaintiff)

Oregon Depa	artment of Cor	rections - A	IC Mail
Institution_	Sputlam (	SID	12063427
Name Dive	1AS LEDN .	SERVOS	
Address 400	5 ADMSVII	E Heurs	SE
City S:4	Em	State W	Zip 97317

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